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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/682,891	10/30/2001	Frank A. Smith	GEPL.P-033	2327
43247	7590	05/22/2008	EXAMINER	
Marina Larson & Associates LLC			OSMAN, RAMY M	
re: lexan			ART UNIT	PAPER NUMBER
PO BOX 4928			2157	
DILLON, CO 80435				
			MAIL DATE	DELIVERY MODE
			05/22/2008	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary	Application No.	Applicant(s)	
	09/682,891	SMITH, FRANK A.	
	Examiner	Art Unit	
	RAMY M. OSMAN	2157	

All participants (applicant, applicant's representative, PTO personnel):

(1) RAMY M. OSMAN. (3) ____.

(2) Office of Marina Larson. (4) ____.

Date of Interview: 5/15/2008.

Type: a) Telephonic b) Video Conference
c) Personal [copy given to: 1) applicant 2) applicant's representative]

Exhibit shown or demonstration conducted: d) Yes e) No.

If Yes, brief description: ____.

Claim(s) discussed: ____.

Identification of prior art discussed: ____.

Agreement with respect to the claims f) was reached. g) was not reached. h) N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: The Office of Marina Larson confirmed that no response has been filed regarding this application. The application is therefore held to be abandoned.

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required